

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: B081001S	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/29/2015
NAME OF PROVIDER OR SUPPLIER AUTUMN HILLS LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 7621 FALCON RD RILEY, KS 66531		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	INITIAL COMMENTS The following citations are the result of a Licensure Resurvey at the above named Home Plus Facility in Riley, Kansas on 10/26/15, 10/27/15, 10/28/15, and 10/29/15.	S 000		
S5225 SS=E	26-42-207 (a) (b) (1)(2)(3)(4) Infection Control a) The administrator or operator of each home plus shall ensure the provision of a safe, sanitary, and comfortable environment for residents. (b) Each administrator or operator shall ensure the development of policies and implementation of procedures to prevent the spread of infections. These policies and procedures shall include the following requirements: (1) Using universal precautions to prevent the spread of blood-borne pathogens; (2) techniques to ensure that hand hygiene meets professional health care standards; (3) techniques to ensure that the laundering and handling of soiled and clean linens meet professional health care standards; (4) providing sanitary conditions for food service; This REQUIREMENT is not met as evidenced by: KAR 26-42-207(b)(1)(2) The census equalled eight the sample included three Residents. The facility identified all Residents in need of assistance to toilet. Based on observations, interviews, and reviews of records, for three of three sampled (#189, #187, and #185), the Operator failed to develop and implement policies and procedures to ensure hand hygiene met professional health care standards during Resident toileting.	S5225		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S5225	<p>Continued From page 1</p> <p>Findings included:</p> <ul style="list-style-type: none"> - On 10/26/15 at 3:16pm, in room of Resident #189, Licensed nurse #G and Certified staff #H assisted Resident with toileting. Staff donned gloves prior to transfer of #189 with gait belt, from wheelchair to commode in Resident room. #G wiped smears of feces from #189's buttocks and coccyx area with moist cleansing wipes as #G and #H assisted #189 to a standing position from commode. #G placed the soiled wipes on the commode rim... #G and #H continued to assist #189 by pulling up new disposable brief and by pulling sweatpants up and into position... staff then turned #189 and gently lowered him/her back into wheelchair. #G (still wearing gloves) moved wheelchair away from commode by placing hands on wheelchair arms and pushing chair... #G and #H assisted #189 with placement of feet on wheelchair foot pedals... #G and #H then removed gloves and placed in trash. <p>By interview on 10/26/15 at 3:38pm, #H confirmed the brief removed from #189 was wet (as well as smeared with feces).</p> <ul style="list-style-type: none"> - On 10/26/15 at 3:40pm, in room of Resident #187, Licensed nurse #G and Certified staff #H assisted Resident with toileting. Staff donned gloves prior to transfer of #187 from wheelchair to toilet in Resident room. #G wiped #187's buttocks and coccyx area with moist cleansing wipes as #187 stood at grab bar near toilet... #G and #H pulled up disposable brief and pants and guided #187 back into wheelchair... 	S5225		

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S5225	<p>Continued From page 2</p> <p>#G and #H removed gloves and placed in trash.</p> <p>- On 10/27/15 at 11:18pm, in room of #185, Licensed nurse #G and Certified staff #D assisted Resident with toileting. Staff donned gloves after telling #185 what they were going to do and placing gait belt around #185. #G and #D encouraged and prompted #185 to stand with their assistance... staff pulled down slacks, removed soiled brief, and then lowered #185 onto a commode in #185's room #G and #D prompted #185 to use the toilet... obtained new brief from closet... positioned new brief with slacks and prepared to assist #185 to stand #D wiped feces from #185's coccyx and buttocks area with moist cleansing wipes as #G and #D attempted to steady and keep #185 in standing position. #D used same gloved hands to apply barrier cream to #185's coccyx and buttock area after using the wipes to clean the soiled area #D and #G then pulled up the new brief, the slacks, and guided #185 back into his/her wheelchair. Staff then removed gloves and placed in the trash.</p> <p>By interview on 10/27/15 at 2:20pm, Owner/Operator stated we do have orientation and inservice on hand washing and glove use and universal precautions... I have a policy and procedure for infection control... I know they know and usually use proper technique... I will get our policy to review...</p> <p>The facility policy and procedure titled "Infection Control" included: The Operator will ensure the provision of a safe,</p>	S5225		

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S5225	Continued From page 3 sanitary, and comfortable environment for Residents Universal precautions will be used to prevent the spread of blood-borne pathogens Stall will be educated on universal precautions when they are hired and complete orientation training on universal precautions Hand Hygiene will meet health care standards Hand Hygiene according to health.gov.bc.ca/library/publications documented: "31. Gloves should be removed immediately and discarded after the activity for which they were used. [All] 32. Gloves should be changed or removed when moving from a contaminated body site to a clean body site within the same patient. [All] 33. Gloves should be changed or removed after touching a contaminated environmental surface. [All]" The Operator failed to develop and implement policies and procedures to ensure hand hygiene met professional health care standards during Resident toileting for #189, #187, and #185.	S5225		
S5380 SS=D	28-39-437 Plumbing and Piping Systems (i) Plumbing and piping systems. (1) Backflow prevention devices or vacuum breakers shall be installed on fixtures to which hoses or tubing can be attached. (2) Water distribution systems shall be arranged to provide hot water at hot water outlets at all times. The temperature of hot water shall range between 98° F and 120° F at showers, tubs, and lavatories accessible to residents.	S5380		

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S5380	<p>Continued From page 4</p> <p>This REQUIREMENT is not met as evidenced by: KAR 28-39-437(i)(2)</p> <p>The census equalled eight the sample included three Residents. The facility identified two water heaters, each served four Resident rooms. The facility identified two ambulatory Residents. Based on observations and interviews, for one of two water heaters, for four of eight Resident rooms, and for one of two ambulatory Residents who lived in one of these four rooms, the Operator failed to ensure the water remained between 98 degrees Fahrenheit (F) and 120 degrees F at all times.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - By observations during the entrance tour of facility, on 10/26/15 at 1:10pm, accompanied by the Owner/Operator, the following water temperatures obtained: <p>Resident room for #189 - 129.7 degrees F Resident room for #185 - 128.8 degrees F</p> <p>On 10/26/15 at 1:10pm, Owner/Operator stated the four Resident rooms on this (North) end of facility and the laundry room are all served by the same water heater... the four Resident rooms and the medication room on the other (South) end are served by the second water heater... if the staff said the water is really hot or really cold I would re-adjust it... we do not have a system to check the water temperatures... we have never done that... we do not keep any logs at this point... we have had no recent hot water tank adjustments, no new water heater installed... we have two ambulatory Residents in facility who may use the hand sinks and one of them lives on this end of</p>	S5380		

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S5380	<p>Continued From page 5</p> <p>the building #180... all other Residents require total staff assistance with all activities of daily living.</p> <p>Random observations during this visit to facility revealed #180 able to ambulate independently from own rooms to the general living room, dining room, and TV lounge areas, using a cane.</p> <p>On 10/27/15 at 9:00am, Owner/Operator stated I have adjusted the hot water heater and would like you to re-check the temperature.</p> <p>On 10/27/15 at 9:00am, the water temperature of the North end Resident rooms registered at 116.7 degrees F.</p> <p>Owner/Operator stated I plan to begin checking the temperatures routinely and begin keeping a record of the temperatures we find.</p> <p>The Operator failed to ensure the water remained between 98 degrees F and 120 degrees F at Resident accessible outlets at all times.</p>	S5380		